

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>4/2/04</u>		2 Serial/Patent # <u>10/661,244</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
	Filing		\$							
	Amendment		\$							
	Extension of Time		\$							
	Notice of Appeal/Appeal		\$							
<input checked="" type="checkbox"/>	Petition	<u>None</u>	<u>2/11/04</u> \$ 130. ⁰⁰							
	Issue		\$							
	Cert of Correction/Terminal Disc.		\$							
	Maintenance		\$							
	Assignment		\$							
	Other		\$							
		7 TOTAL AMOUNT OF REFUND \$ 130. ⁰⁰								
		8 TO BE REFUNDED BY:								
		Treasury Check								
		<input checked="" type="checkbox"/> Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>1</td><td>9</td><td>--</td><td>4</td><td>5</td><td>1</td><td>6</td> </tr> </table>		1	9	--	4	5	1	6
1	9	--	4	5	1	6				
10 REASON:										
	Overpayment									
	Duplicate Payment									
<input checked="" type="checkbox"/>	No Fee Due (Explanation):									
<u>Pto lost the papers</u>										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Paul Shanowski</u>		TITLE: <u>Attorney</u>								
SIGNATURE: <u>Paul Shanowski</u>		PHONE: <u>305-0011</u>								
OFFICE: <u>Off of Petitions</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>Alicia Kelly</u>		DATE: <u>4-7-04</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B